#### Maryland Health Care Reform Coordinating Council Friday, October 15, 2010

# Racial and Ethnic Minorities: The Key Audience for Health Reform in Maryland

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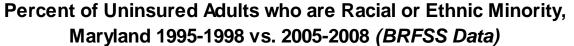


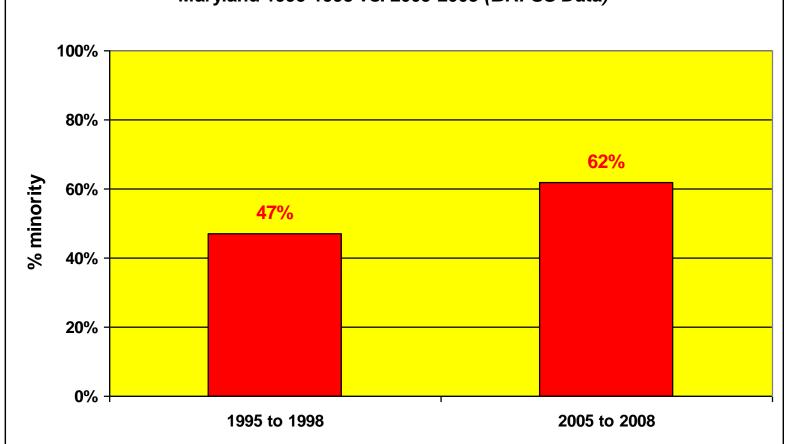




#### Most Maryland Uninsured are Minority









### Minorities Increasing as Percentage of the Uninsured Because ...

- The rate of uninsurance is higher among minorities, and
- Minorities are an increasing percentage of Maryland's population
- Maryland's growing minority population:
  - In 2001, 37.3% racial/ethnic minority
  - In 2008, 41.6% racial/ethnic minority
  - In 2009, 42.5% racial/ethnic minority





#### Maryland Population, July 1, 2009 by Race and Ethnicity

**2,423,401 42.5%** (Racial Eth Minority)

Race	All Ethnicity		Non-Hispanic		Hispanic	
White	3,630,268	63.7%	<b>3,276,077</b> (Non Hispani	<b>57.5%</b> c white)	′	6.2%
Non-White	2,069,210	36.3%	2,012,268	35.3%	56,942	1.0%
Black	1,726,477	30.3%				
Asian/Pac Isle	318,464	5.6%				
American Indian	24,269	0.4%				
MD Total	5,699,478	100.0%	5,288,345	92.8%	411,133	7.2%

#### Racial or Ethnic Minority Population (Number and Percent), by Jurisdiction, Maryland 2008

Frederick

43,328

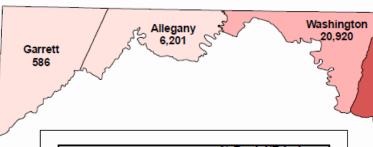
Montgomery 430,833

Carroll

13,503

Howard.

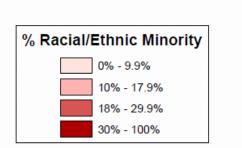
Prince George's



	% Racial/Ethnic
Maryland Counties	Minority
Prince George's	82.19
Baltimore City	68.99
Charles	47.09
Montgomery	45.39
Somerset	45.39
Howard	35.29
Baltimore County	33.19
Dorchester	31.09
Wicomico	29.49
Anne Arundel	23.99
Saint Mary's	20.99
Kent	20.39
Caroline	20.29
Frederick	19.29
Calvert	19.19
Worcester	18.29
Talbot	18.19
Harford	17.99
Washington	14.49
Queen Anne's	11.79
Cecil	9.89
Allegany	8.69
Carroll	8.09
Garrett	2.09

41.6%

Maryland Total



Charles

66,191



Worcester 8,982

Cecil

9,805

Kent

4,090

Anne's

5,530/

Talbot 6,545

Dorchester 9,924

Date Map Created: January 2010

Caroline 6,691

> Wicomico 27,652

Somerset

Harford

42,914

Baltimore

260,214

Baltimore

City

439,039

Anne

Arundel

122,465

Calver

16,916

St. Mary's 21,234

#### Selected Health Disparities in Maryland

Ratio compared to Whites	American Indian or Alaska Native	Asian or Pacific Islander	Black or African American	Hispanic or Latino
Infant Mortality Rate (2004-08)	1.8	Similar	2.6	Similar
Late or no prenatal care (2004-08)	1.1	1.3	2.9	3.5
New cases of End-stage Kidney Disease (1991 to 2001)	3.0	1.3	3.0	1.3
Lack of Health Insurance at Time of Survey (2004-08)		1.7	2.1	4.7
Unable to Afford Care in the Prior 12 Months (2004-08)		1.5	1.8	2.9
New HIV case rate (2007)			11.0	2.7
New AIDS case rate (2007)			13.0	4.0



### Black or African American Health Disparities in Maryland

- Age-adjusted death rate from all causes combined
  - (1.25 times higher for Blacks or African Americans than for Whites in 2008)
- Compared to Whites, the Black or African American age- adjusted death rates in 2008 were:
  - 1.3 times higher for heart disease
  - 1.2 times higher for cancer
  - 1.2 times higher for stroke
  - 2.1 times higher for diabetes
  - 1.9 times higher for septicemia
  - 2.0 times higher for kidney diseases
  - 5.9 times higher for homicide
  - 15.5 times higher for HIV/AIDS





### Black or African American Health Disparities in Maryland (2)

- Black or African American adults reported higher prevalence of the following compared to Non-Hispanic whites for the period 2004 to 2008
  - a diagnosis of diabetes at all adult ages
  - a diagnosis of hypertension (high blood pressure) at all adult ages
  - current cigarette smoking for ages 45 and older.
- Compared to Whites, in 2006 Black or African American adults had
  - 1.3 times higher prevalence of asthma
  - 4.3 times higher emergency department visit rate for asthma
  - 2.4 times higher hospitalization rate for asthma
  - 2.4 times higher mortality rate for asthma.

Maryland
Health Services
Cost Review
Commission
Hospital Discharge
Data 2004

Estimates of the cost of excess Black or African American Hospital Admissions for selected conditions and selected payers.

## Cost of Disparities, Maryland 2004 Cost of Excess Black or African American Admissions Hospital Component of Hospital Admissions MHHD Analysis of HSCRC Hospital Discharge Data

	Medicaid	All Payer	
<b>Primary Diagnosis</b>	<b>Excess Cost</b>	<b>Excess Cost</b>	
All Diagnoses	\$59 Million	\$481 Million	
Heart Disease	\$5 Million	\$38 Million	
Cancer	\$1 Million	\$7 Million	
Diabetes	\$3 Million	\$26 Million	
Asthma	\$2 Million	\$18 Million	
Neonatal Intensive Care Admissions	\$3 Million	\$20 Million	

Does not include Physician component of Hospital Admission
Does not include Emergency Room costs
Does not include Outpatient Care costs

#### 2006 Maryland Medicare Data

The analysis on this slide looks at admissions for conditions where good outpatient care can prevent most inpatient admissions (ambulatory care sensitive conditions or ACSC's)

## Cost of Disparities, Maryland 2006 Cost of Excess Black or African American Admissions Hospital Component of Hospital Admissions MHCC analysis of Maryland Medicare data

	Medicare	
Primary Diagnosis	<b>Excess Cost</b>	
Congestive Heart Failure	\$13 Million	
<b>Urinary Tract Infection</b>	\$2 Million	
Dehydration	\$2 Million	
Diabetes	\$5 Million	
Asthma	\$1 Million	
Hypertension	\$1 Million	

Does not include Physician component of Hospital Admission
Does not include Emergency Room costs
Does not include Outpatient Care costs

#### Maryland Asthma Disparity Data Show a Disparity in Disease Management Success

- Compared to Whites, in 2006 Black or African American adults in Maryland had
  - 1.3 times higher prevalence of asthma
  - 4.3 times higher emergency department visit rate for asthma
  - 2.4 times higher hospitalization rate for asthma
  - 2.4 times higher mortality rate for asthma
- 1.3 times more disease generating 4.3 times the emergency visit rate clearly shows worse outcomes for Blacks with asthma compared to Whites with asthma.
- This should be considered a system-level disparity in medical care quality.